

Please type a plus sign (+) in this box ☐

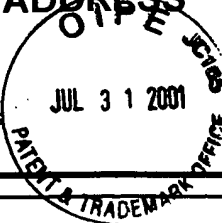
PTO/SB/122 (10-00)

Approved for use through 10/31/2002. OMB 0651-0035
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

CHANGE OF CORRESPONDENCE ADDRESS Application

Address to:
Assistant Commissioner for Patents
Washington, D.C. 20231



| | |
|------------------------|---------------------------|
| Application Number | 09/545,592 |
| Filing Date | April 7, 2000 |
| First Named Inventor | Richard Henry Mandel, III |
| Group Art Unit | 2771 |
| Examiner Name | NA |
| Attorney Docket Number | 0920.0012C |

Please change the Correspondence Address for the above-identified application to:



Customer Number

27896

Type Customer Number here



27896

PATENT & TRADEMARK OFFICE

OR



Firm or
Individual Name

Epstein, Edell, Shapiro, Finnan & Lytle, LLC

Address

1901 Research Blvd.

Address

Suite 400

City

Rockville

State

MD

ZIP

20850

Country

United States

Telephone

(301) 424-3640

Fax

(301) 762-4056

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the :



Applicant/Inventor.



Assignee of record of the entire interest.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).



Attorney or Agent of record.



Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

RECEIVED

AUG 02 2001

Technology Center 2100

Typed or Printed
Name

J. Warren Lytle, Jr.

Reg. No. 39,283

Signature

Date

July 31, 2001

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.



*Total of _____ forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.